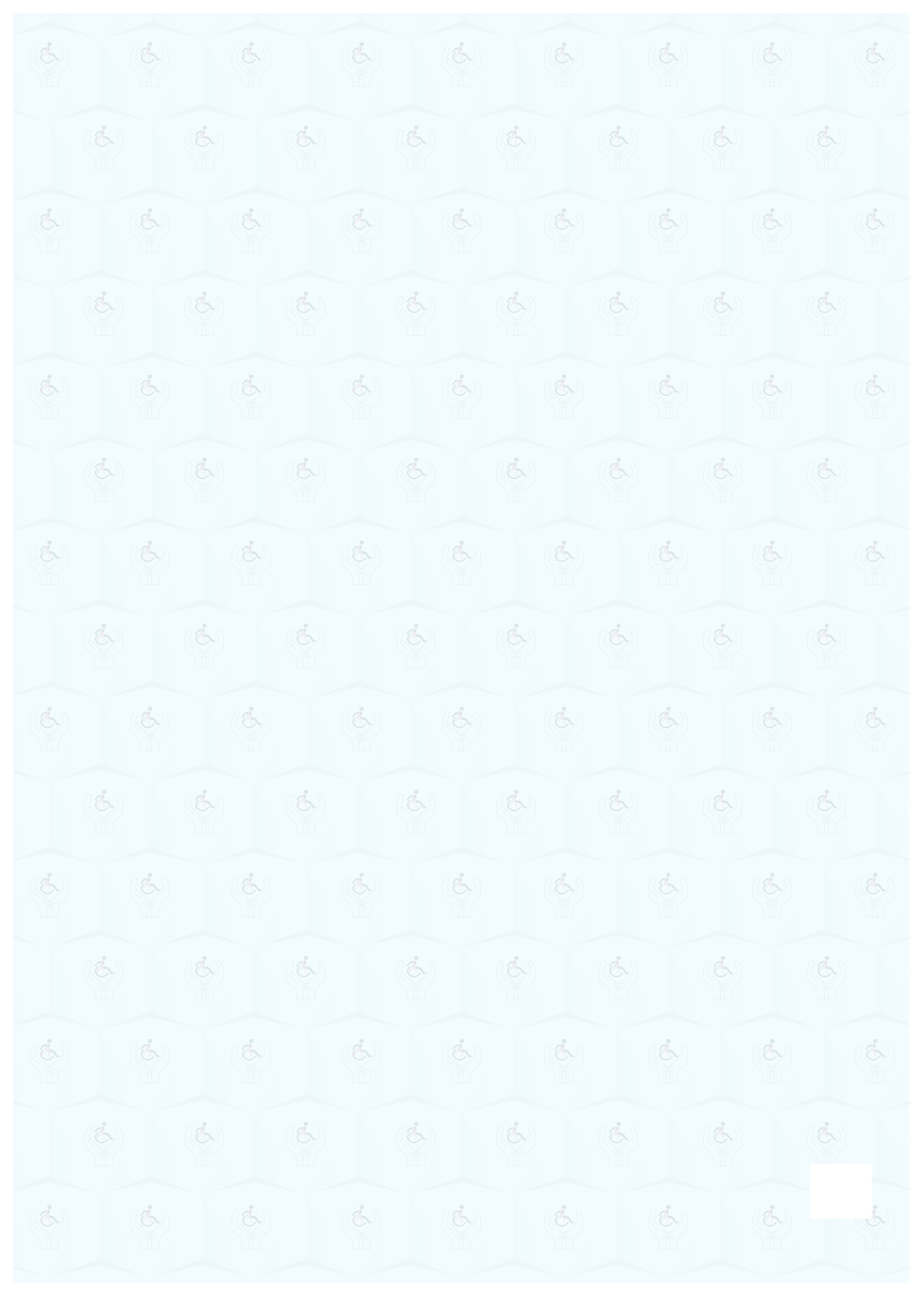


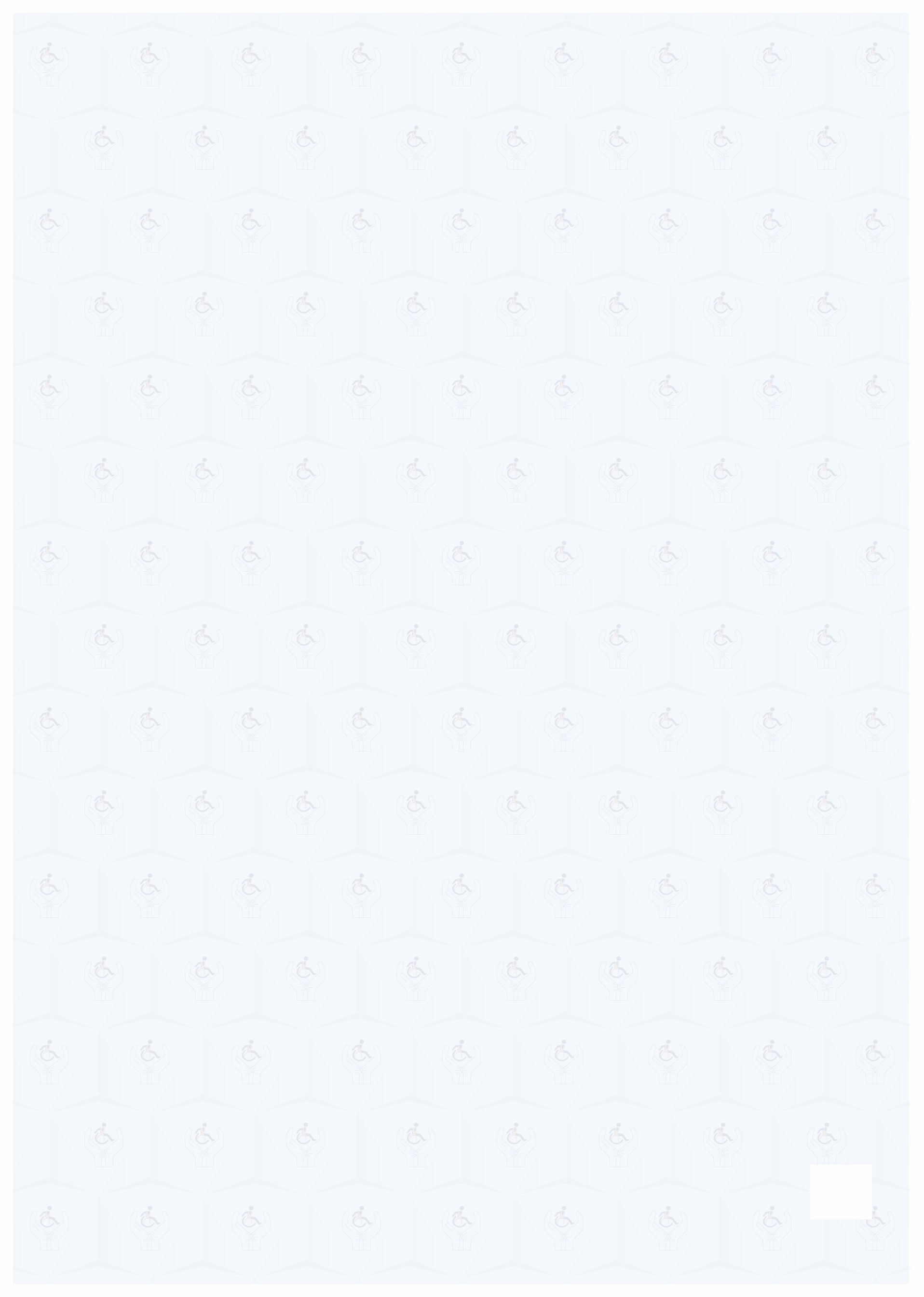
**NOTE ON FORMATTING**



The formatting for this report follows an accessible style that allows for easier reading for people with visual disabilities. It was made accessible for screen readers. Our intention is to make the content of this report available to all our community members who contributed to the content. With this design choice, we also want to raise awareness of the simple changes possible to create greater accessibility for people with disabilities.

The accessible formatting choices for this report include: a larger, sans serif font; 1.5 line spacing; left orientation; page width instead of two columns; use of endnotes instead of footnotes; and alt text for images.

Unfortunately, the use of tables was unavoidable



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**Acknowledgement**

The ADPHA Uganda 2024-2029 strategic plan is a continuation of the of 2017-2023 strategic plan and learnings picked up from the 15 years of existence, from MADPHA and now ADPHA Uganda which saw tremendous growth of the organization.

ADPHA Uganda is famously known for working on the rights of people on the intersectionality of disability, HIV/AIDS and Tuberculosis (TB) in Uganda. And with this new strategic plan, ADPHA Uganda is aiming at consolidating and strengthening the achievements and also the integration of the cross cutting aspects; including addressing Malaria, Sexual Reproductive Health Rights (SRHR), Gender Based Violence(GBV), Climate Change, Nutrition and Food Insecurity, Resilience to Pandemics with a learning from COVID-19 Pandemic and living with disability as well as increasing efforts on documentation and knowledge management, leveraging on advancements in technology, building the capacity of the secretariat and the governance of ADPHA Uganda.

In this regard, on behalf of ADPHA Uganda, I would like to take this opportunity to sincerely thank, first and foremost our partners; Amplify Change and Stop TB Partnership/ UNOPS for supporting the process of developing the 2024-2029 Strategic Plan. Their generosity is a marked sign of their closeness to ADPHA Uganda. Thanks to Mr. Thomas Kyokuhaire and the team who ably facilitated the process, provided the much-needed expertise to our work and guided us through all stages of consultations, up to the final draft of the document. We would like further to appreciate Ms. Gisa Dang for the insightful reviews and comments that guided the direction of this important plan.

Special thanks to all stakeholders and other partners including members of the disability movements, TB and HIV constituencies and The Ministry of Health, Mr. Jude Muleke (Pokino ) the traditional chief of Buddu County – Buganda Kingdom and all the others who participated in the consultation process.

Finally, to all Board and staff members who made a tremendous contribution to this journey directly or indirectly. I thank you all. We all believe that with the implementation of this strategy which is contributing to our desired Vision and Mission of a “A society where all Persons with Disabilities living with HIV & AIDS, and those affected by TB realize their rights, and have equal and adequate access to information and services without discrimination” and “To work in partnership with others to remove the barriers in the health care system and service provision in Uganda so that persons with disabilities living with HIV & AIDS, and those affected by TB live decent and fulfilling lives” respectively will aid ADPHA Uganda to smoothly observe her aforementioned Mission and Vision.

Yours Sincerely,



Richard Musisi

Executive Director

Acronyms

ADPHA Association of Persons with Disabilities Living with HIV & AIDS and Affected by Tuberculosis

AIDS Acquired Immunodeficiency Syndrome

HIV Human Immunodeficiency Virus

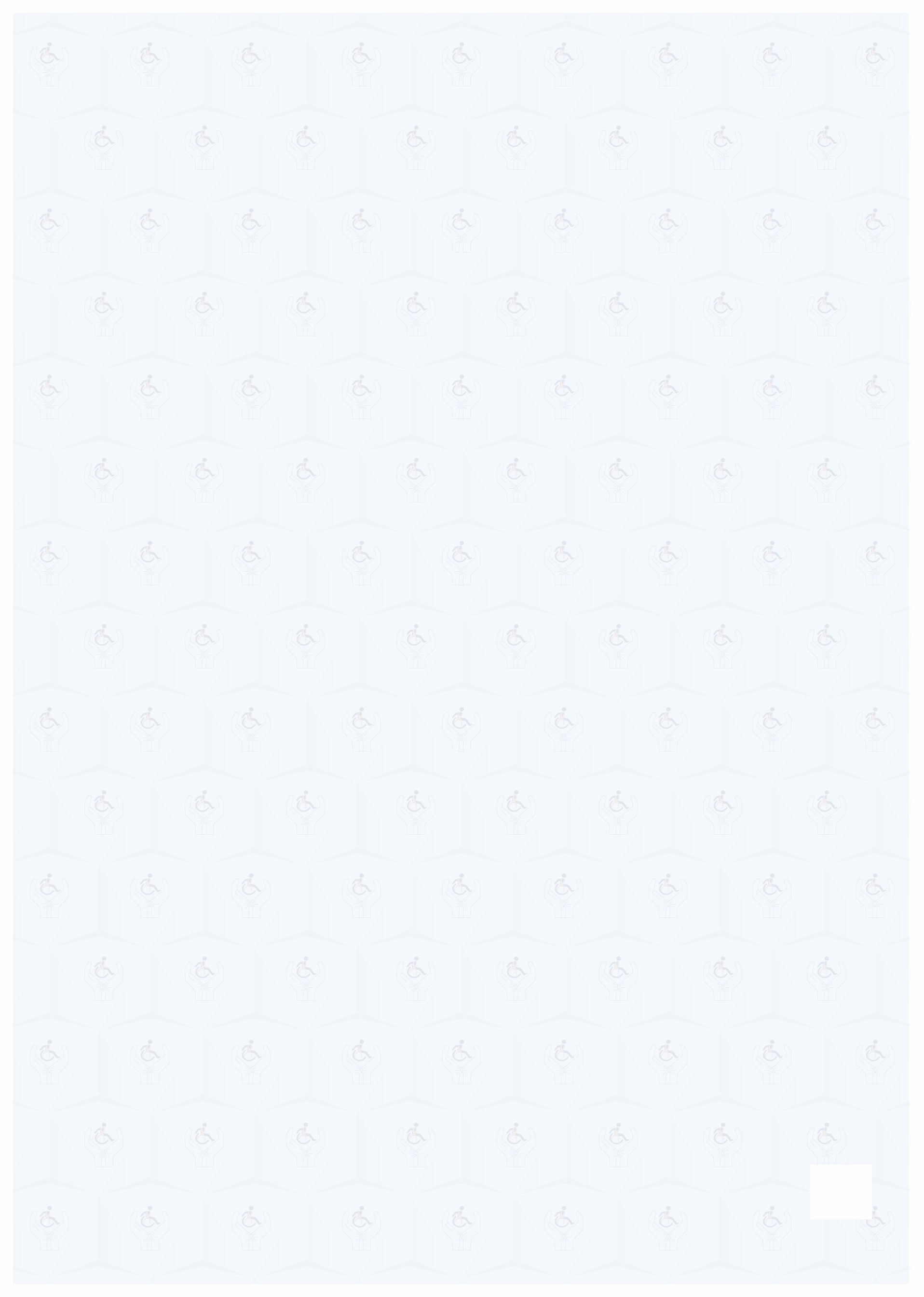
MADIPHA Masaka Association of Persons with Disabilities Living with HIV & AIDS

NTLP National TB and Leprosy Program

TB Tuberculosis

OPDs Organisations of Persons with Disabilities

UNCRPD United Nations Convention on Rights of Persons with Disabilities



# Introduction

## Objectives of the Strategic Planning Process

The Association of Persons with Disabilities Living with HIV & AIDS and Affected by Tuberculosis (ADPHA Uganda) has developed the Strategic Plan 2024 – 2029 based on the hindsight of the lessons learned during the 15 years of existence and an extensive reflection on the just ended 2017 – 2023 Strategic Plan. In addition, focus was placed on the changing context and inherent desire to grow the organisation that is responsive to the needs of its members and stakeholders in a more sustainable manner.

The ADPHA Uganda Strategic Plan 2024 – 2029 lays a foundation for reenergising and revitalising ADPHA Uganda to face up the current and future challenges in ensuring that persons with disabilities living with HIV & AIDS and those affected by TB are addressed. This Strategic Plan makes cognisance of the intersectional factors, such as Sexual and Reproductive Health Rights, Climate Change, with living with a disability. This Strategic Plan (2024 – 2029) significantly amplifies the current objectives, namely, mobilising and empowering persons with disabilities to seek care and support; building the capacity of service providers and other duty bearers in the HIV & AIDS and TB sectors in inclusive service provision; strengthening the Sub County and District Associations; nurturing strategic partnerships and alliances; increasing efforts on documentation and knowledge management; leveraging on advancement in technology and innovation to scale up reach and coverage; and strengthening the capacity of the staff and operational competences of the secretariat for more impactful implementation of activities and programmes.

## Methodology

This Strategic Plan was developed after reviewing and evaluating the 2017 – 2023 strategic plan and other reports based on the strengths, weaknesses, opportunities and threats (SWOT) framework; as well as analysing the political, economic, social, technological, ecological and legal contexts that ADPHA Uganda is operating.

In addition, intensive consultations were conducted with a wide spectrum of stakeholders. The consultations involved the members of the Board of ADPHA Uganda; the leaders of the District associations of Kalungu, Lyantonde, Mpigi, Masaka, Rakai, Bukomansimbi, Lwengo, and Sembabule districts; and the individuals who started MADIPHA in 2009.

The consultations were also made with Staff and volunteers at ADPHA Uganda; the Pokino (The Buddu County cultural Chief of Buganda Kingdom); the beneficiaries of both MADIPHA’s and ADPHA Uganda’s activities and services; some of the funders of the current projects; and other national Organisations of Persons with Disabilities (OPDs).

The review of the documents and the consultations focused on conducting the SWOT and PESTEL Analyses. The SWOT analysis documented the strengths and the available opportunities that would enable ADPHA Uganda achieve its objectives for the period 2024 – 2029. It also documented the threats and weaknesses that formed the benchmark for determining the risk profile for ADPHA Uganda.

The PESTEL (Political, Economic, Social, Technological, Ecological and Legal) Analysis enabled the reflection of the environment that ADPHA Uganda is likely to operate and how it is likely to impact on ADPHA Uganda’s work during the period 2024 – 2025.

Workshops involving selected stakeholders were conducted aimed at providing feedback, validate the key findings and to generate consensus and buy-in.

# The Profile of ADPHA Uganda

## History

The Association of Persons with Disabilities Living with HIV & AIDS (ADPHA) Uganda LTD, formerly known as MADIPHA, is an Association of persons with disabilities living with HIV & AIDS and are affected by TB. The Association was first registered in 2009 with the Masaka district local government (C.D 7131), under the name Masaka Association of Persons with Disabilities Living with HIV & AIDS (MADIPHA) as a community-based organization. MADIPHA was started by a group of persons with disabilities living with HIV & AIDS as a peer support group to advocate for equal and timely access to information and services on HIV & AIDS to all categories of Persons with Disabilities in greater Masaka region. This included raising awareness on HIV & AIDS among persons with disabilities, raising awareness on disability among service providers and actors in the HIV & AIDS sector, and providing support to peer persons with disabilities living with HIV & AIDS.

After 14 years of existence, MADIPHA transformed from a Community Based Organisation (CBO) operating in Masaka District into a National NGO – Association of Persons with Disabilities Living with HIV & AIDS (ADPHA Uganda), with focus on advocating for the rights of persons with disabilities as provided for under the UNCRPD and other international and national instruments, addressing the needs of, and challenges encountered by persons with disabilities living with HIV & AIDS and those affected by TB in Uganda, and to contribute to the knowledge and understanding of the intersectionality between HIV & AIDS and TB and living with disability.

## Vision of ADPHA Uganda

“A society where all Persons with Disabilities living with HIV & AIDS, and those affected by TB realise their rights, and have equal and adequate access to information and services without discrimination.”

## Mission of ADPHA Uganda

To work in partnership with others to remove the barriers in the health care system and service provision in Uganda so that persons with disabilities living with HIV & AIDS, and those affected by TB live decent and fulfilling lives.

## Values of ADPHA Uganda

The core values of ADPHA Uganda are:

* **Equity and Inclusion**: ADPHA Uganda strongly believes that everyone, irrespective of their origin, gender, sex, religion, disability, orientation deserves the opportunity to live their full potential; and that our communities and societies are stronger when they are full of opportunities for people with diverse identities, backgrounds and perspectives. We strive to make our societies more equitable and inclusive.
* **Community and Teamwork:** ADPHA Uganda values the transformative impact of collaboration. We are deeply connected with people with disabilities living with HIV & AIDS, and those affected by TB, their families and our community. We commit to allowing their voices to guide our work, and to doing whatever it takes to support them to thrive.
* **Transparencyand Accountability**: ADPHA Uganda upholds high standards through accountability and transparency. We are mindful that the actions we take have an impact on lives of the people and the communities we serve. We are entrusted by those we serve to observe the highest standards and ethics. We hold ourselves and one another responsible and accountable for whatever we do and say we will do.
* **Respect and Empathy:** ADPHA Uganda roots itself in shared humanity and treat each other with kindness and compassion. We strive to recognize and understand the perspectives, feelings and lived experiences of others, including and especially those most different from ourselves.
* **Learning and Openness:** We build spaces for engagement, reflection and developing competencies central to our work. As part of that growth process, we acknowledge our missteps with humility and lean into our responsibility to learn and evolve.
* **Partnership**: We work in partnership with others to achieve its objectives

## Current Approach of ADPHA Uganda

ADPHA Uganda is currently using the following approaches to undertake its commitments.

### Raising awareness on Disability and HIV/AIDS and TB

Persons with disabilities living with HIV & AIDS and those affected by TB still face stigma and discrimination from families, communities, and healthcare service providers. There still exists a lot of self-stigma among persons living with disabilities. ADPHA Uganda has devoted a lot of effort on raising awareness on HIV & AIDS and TB among persons with disabilities. This is being done through encouraging persons with disabilities to test for HIV & AIDS and TB, and supporting those who are infected to seek care and support. ADPHA Uganda is also supporting the self-advocates – those who have come out and declared their status so as to give example to others, and the peer support groups. This has resulted in an increase in the numbers of persons with disabilities seeking more information on HIV & AIDS and TB, those testing for HIV & AIDS and TB and those living positively with HIV & AIDS and TB.

The awareness has also targeted and benefited other stakeholders, including the Service providers, caretakers of children/persons with disabilities, leaders of OPDs, the local leaders, the religious leaders, the cultural leaders, and government officials – thus increasing the understanding what it means being a person with disability at the same time living with HIV & AIDS and/or being a person with disability at the same time affected by TB; and at worst, with both and affected with other co-morbidities malaria, epilepsy, diabetes.

### Advocating for Inclusive Access to HIV & AIDS and TB Care and Support

Persons with disabilities living with HIV & AIDS and those affected by TB still face barriers in accessing healthcare and support. There is still discrimination and stigmatisation of persons with disabilities living with HIV & AIDS and those affected by TB by health workers and other care providers. ADPHA Uganda works with TASO and other HIV & AIDS and TB service providers to ensure that persons with disabilities who need services, care and support are not left out, and the services are provided in forms and ways that are appropriate for persons with disabilities. With this approach, Masaka Regional Hospital (TASO Masaka) has made provisions for special attention to persons with disabilities living with HIV & AIDS. They have even recruited a person with disability as a focal person.

In addition, the Uganda Stop TB Programme has recognised ADPHA Uganda as a core member.

### Increasing Efforts in Fundraising and Resource Mobilisation

MADIPHA started off with contributions from the founders and other members as personal contributions and membership fees. However, the increasing demands of running an organisation and meeting the expectations of its members, there arose a need to seek for external funding and support. By the end of 2023, ADPHA Uganda had received funding from a number of organisations to implement a range of interventions and for institutional development. This effort resulted in increasing the number of donors from two in 2017 to ten in 2023; and increasing the annual financial portfolio from UGX37 million in 2017 to UGX572 million in 2023. The donors included; ADD International, DHF, DRF, Abilis Foundation, NERVE Network, Stop TB Partnership, VOICE Project, PVA Agility Fund, Amplify Change, ViiV Health care and Treatment Action Group (TAG).

In addition to financial support, ADPHA Uganda has benefited from in-kind support and technical support from a number of organisations and individuals. For instance, ADPHA Uganda received valuable technical support on data collection methodologies from the Global Therapy, Dure Technologies, Treatment Action Group (TAG) and National TB Program (NTLP- Ministry of Health).

This feat has been achieved through enhancing the capacity of staff in preparing high quality proposals and reports, and increasing accountability, transparency and compliance. These have contributed to increasing ADPHA Uganda’s competitiveness and donor confidence.

### Maintaining Strategic Partnerships

ADPHA Uganda recognises the huge task of ensuring a society where all Persons with Disabilities living with HIV & AIDS, and those affected by TB have equal and adequate access to information and services on HIV & AIDS, and TB without discrimination. ADPHA Uganda further recognises the contribution other organisations, agencies, individuals can make to realise that dream. In light of this, ADPHA Uganda decided to identify and nurture relationships and partnerships in order to advance this cause.

ADPHA Uganda has maintained a strong relationship with the community structures and networks of persons with disabilities living with HIV & AIDS and those affected by TB. These have been very instrumental in mobilisation and advocacy work of ADPHA Uganda.

ADPHA Uganda has also maintained a good and formal working relationship with the local governments in all areas of operation – both the lower and higher local governments.

ADPHA Uganda has also nurtured the partnership with the Buganda Kingdom, through the POKINO – which has earned ADPHA Uganda special recognition by the Kingdom. ADPHA Uganda has a good working relationship with Masaka Catholic Diocese.

In addition, ADPHA Uganda established relationships with technical organisations in disability and those in HIV & AIDS and TB. These have provided both technical support and guidance, and financial support.

By 2023, ADPHA Uganda had partnerships with the following:-

* TASO Uganda
* Dask Handicap forbound (DHF)
* ViiV Health Care
* Katalemwa Cheshire Services –Building Effective Networks (BEN) program
* Voice Uganda Project
* Stop TB Partnership
* Amplify Change
* Frontline AIDS PVA Agility Fund.
* Treatment Action Group (TAG)
* District Associations of Rakai, Kalungu, Lwengo, Bukomansibi, Masaka, Lyantonde, Mpigi, Kyotera, and Sembabule.

In addition, ADPHA Uganda collaborates with the Ministry of Health, and more especially through the National Advocacy Disability TB and HIV Taskforce (NADITH).

### Strengthening the Leadership and Governance at ADPHA Uganda

ADPHA Uganda recognises the role of leadership and governance in enabling the organisation to achieve its objectives and goals. ADPHA Uganda has trained the members of the Board, the individual members and staff on their roles and functions, social mobilisation, resource mobilisation, financial and other human resources management, reporting, risk management, safeguarding. Similar trainings were conducted for their members and clusters. Other skilling included sign language, counselling and advocacy.

In addition, ADPHA Uganda has developed and maintained up-to-date policies that are aimed at strengthening the functionality of the organisation. These policies include The Safeguarding Policy; the Child protection policy; Gender policy; the Whistle Blowing and Protection policy; Anti-Fraud, Bribery and Corruption policy; Financial Policy and Procedures; Human Resource Management Policy.

## Current Challenges

### Limited resources to meet the needs of the members and of ADPHA Uganda

The needs of persons with disabilities living with HIV & AIDS and those affected by TB are well beyond just accessing healthcare without discrimination. They also include social, economic, meaningful participation, prevention from abuse and sexual and reproductive health. ADPHA Uganda still lacks sufficient resources to hire multidisciplinary and technical staff to provide the services and support as required by all the persons with disabilities living with HIV & AIDS and those affected by TB.

Even within the greater Masaka region where MADIPHA started, not all the areas are covered. The reach is still limited as ADPHA Uganda still lacks sufficient resources to cover all the locations to meet the expectations of all the members and of persons with disabilities living with HIV & AIDS and those affected by TB.

Secondly, the majority of the current membership of ADPHA Uganda are persons with physical disability. The challenge remains to reach other persons with different disability categories.

### High Operational Expenses

ADPHA Uganda is still operating in rented premises, which raises the operational expenses.

# Context

## The Operating Environment

This Section describes the current environment in which ADPHA Uganda is operating. This has, to a greater extent, influenced the choice of approaches and actions for the period 2024 – 2029.

### Marginalisation of Persons with Disabilities

In Uganda, like elsewhere in the world, there still exist high levels of marginalisation and discrimination of persons with disabilities in all spheres.

Secondly, there still exists widespread stigmatisation of people living with HIV & AIDS and TB in Uganda.

Therefore, stigmatisation and discrimination of persons with disabilities living with HIV & AIDS and those with TB, including survivors of TB shall still remain a big issue in 2024 – 2029.

In Uganda, gender based violence still remains the most pervasive of the human rights violations in Uganda. The National Survey on Violence in Uganda reported that 95% of women had experienced physical and/or sexual violence (Uganda Bureau of Statistics, 2021). A study published by the Journal of Environmental Research and Public Health, found that 64% of women living with disabilities in Uganda reported having sexual, emotional or physical abuse by an intimate partner; and 35% of women living with disabilities in Uganda had experienced sexual violence. The Working Group on Violence Against Women with Disabilities, “Forgotten Sister” in 2012 reported that women with disabilities suffered up to three times greater risk of rape than their peers without disability. Other studies have put the risk at ten times more! Additionally, there is an increase in cases of sexual and gender based violence against persons with disabilities that remain unmentioned and unreported in communities.

### High Prevalence of HIV & AIDS and Impact of TB among Persons with Disabilities

In Uganda, there is still high prevalence of HIV & AIDS; with the national average for 15 – 49 years being 5.1% (Source: Uganda AIDS Commission). According to the available data, the areas where ADPHA Uganda is currently operating still have prevalence rates higher than the national average. Please refer to the Table below:-

|  |  |
| --- | --- |
| District | Prevalence as at 31st December 2020 (%) |
| Masaka | 11.7 |
| Kalungu | 11.7 |
| Lyantonde | 10.1 |
| Lwengo | 9.0 |
| Bukomansimbi | 6.3 |
| Kalangala | 18.8 |
| Rakai | 4.8 |
| Kyotera | 11.1 |
| Sembabule | 4.6 |
| Mbarara | 13.1 |
| Mid North | 6.7 |
| North Buganda | 6.0 |
| South Buganda | 8.3 |
| South Western | 6.0 |

*Source: Uganda HIV and AIDS Factsheet 2021 (Based on Data ending 31st December 2020)*

It is further reported that the HIV prevalence among persons with disabilities stands at 17%; which is way above the national average. On further analysis, the data available is not disaggregated to indicate the proportion of persons with disabilities living with HIV & AIDS.

And whereas Uganda has reported achieving the 90 – 90 – 90 target by 2020, it is not clear whether this also applies to persons with disabilities. Interactions with persons with disabilities has indicated that there are still many who have not accessed HIV & AIDS services due to a number of factors.

In Uganda, TB is the number four cause of death among the communicable, maternal, neonatal and nutritional diseases (*IHME Global Burden Disease, 2020*). In 2019, 65,897 TB cases were notified (an increment of 3%); out of the 90,000 people were estimated to have developed TB (14% of whom were children), only 60,887 were on treatment. It is further reported that in 2019, there was a 24% increment in the number of people with TB who start the treatment, but drop off before completing the prescribed dosage. In addition to this, it is further reported that the number of TB patients developing drug resistance is on the rise. However, there is still glaring gaps in inclusion of persons with disabilities. For instance, the Ministry of Health, in conjunction with other partner conducted an assessment of TB, gender and other vulnerable populations in 2023 (*Uganda Tuberculosis Gender, Key and Vulnerable Populations Assessment Report – Ministry of Health, April 2023*) did not indicate the extent TB is affecting persons with disabilities.

### Nature of Programming on HIV & AIDS, TB and Disability

HIV & AIDS, just like Disability, requires lifelong care and support. HIV & AIDS and TB further exacerbates the condition of a person living with a disability in terms of dealing with stigma and discrimination; and also in striving for living a decent life. In some cases, it comes along with other complications relating to health and sexual and reproductive health rights. It is also reported that HIV & AIDS has triggered gender based violence and domestic violence.

It is further documented that HIV & AIDS and disability are both the cause and the consequence of poverty in Uganda. The effects of climate change are disproportionally impacting persons with disabilities, and even more for persons with disabilities living with HIV & AIDS and those affected by TB.

ADPHA Uganda therefore needs to develop long term and multisectoral programmes – a shift from implementing short term (and usually isolated) projects to programme based approaches.

### Reputation of ADPHA Uganda and Uniqueness of ADPHA Uganda’s Work in Uganda

Whereas there has been a tremendous growth of the disability sector since 2017, with the number of organisations and programmes coming up, ADPHA Uganda still remains the champion and the only one addressing the issue of HIV & AIDS and TB among persons with disabilities. ADPHA Uganda has also greatly improved in understanding of the subject matter, based on the lessons learned and experiences shared for the last 15 years of existence.

ADPHA Uganda has built and maintained a good reputation in Uganda and among its membership. This reputation shall remain important in the delivery of the objectives of the 2024 – 2029 Strategic Plan.

## Strengths of ADPHA Uganda

During the review of the Strategic Plan 2017 – 2023, the following were found to be the major strengths of ADPHA Uganda. In addition, these strengths were also deemed to be relevant for the periods ahead.

### Sustained Focus on HIV & AIDS and TB

Since its inception, MADIPHA and now ADPHA Uganda has remained focused on this unique intervention. Even though opportunities for funding for HIV & AIDS has largely been limited, compared to other sectors, ADPHA Uganda remained committed to HIV & AIDS, TB and its impact on persons living with disability. This has not only demonstrated their strong commitment to disability and HIV & AIDS and TB, but has also given ADPHA Uganda an opportunity to acquire knowledge and experience in the subject matter. ADPHA Uganda has generated and documented lived experiences of persons with disabilities living with HIV & AIDS and those affected by TB which continue to contribute to understanding how HIV & AIDS impacts persons with disabilities. This lived experience shall remain a big resource to ADPHA Uganda and to all actors, practitioners, and to researchers and scholars for many years to come.

### Leadership and Governance at ADPHA Uganda

ADPHA Uganda has maintained a strong, focused and committed leadership which has enabled ADPHA Uganda to grow and thrive. ADPHA Uganda has put in place policies, functional systems and structures that promote and maintain professional and smooth running of the organisation and implementation of programmes.

ADPHA Uganda has maintained a culture of conducting periodic and regular meetings, reflection sessions and retreats, all of which have been instrumental in enhancing skills in leadership of the members of the Board, the managers, the staff and the general membership of ADPHA Uganda. This culture and practice has greatly contributed to the governance at ADPHA Uganda and the amicable generation of consensus, including over contentious issues.

### Accountability, Transparency and Compliance

ADPHA Uganda has complied with all the legal requirements as an entity in Uganda since its inception. This has been done both at the national and local government level. For instance, ADPHA Uganda is fully registered with the Uganda NGO Bureau and has Memoranda of Understanding with the District Local Governments where ADPHA Uganda is currently operating.

In addition, ADPHA Uganda fully complies with Tax, the Financial Intelligence and the Data Protection regulations as applicable in Uganda.

ADPHA Uganda has been developing realistic plans and budgets, and preparing reports that reflect the true of the implementation.

The leadership and staff at ADPHA Uganda have, over the years, demonstrated adherence to the policies and guidelines; and lived exemplary lives.

These have contributed to building the confidence and acceptability among the donors, the members and other stakeholders.

### Community Approach

ADPHA Uganda has adopted the identification of persons with disabilities living with HIV & AIDS through the community structures, mainly the OPDs. In addition, the support and empowerment of persons with disabilities living with HIV & AIDS and those affected by TB has also been the community and family networks and through the Community Based Peer Monitors. This community approach was vital to addressing the underlying drivers of stigmatisation and discrimination, but also building a cost effective and sustainable system for supporting persons with disabilities living with HIV & AIDS and those affected by TB.

### Adaptability to Changing Context

ADPHA Uganda has demonstrated flexibility and ability to learning, which has enabled the organisation to adapt to new programme contexts and environment. For instance, ADPHA Uganda was quick to adopt and incorporate the One Impact Community Led Monitoring App to fast-track reporting the barriers persons with disabilities were encountering while accessing the TB services. This is also enabling ADPHA Uganda to provide information on TB to the communities in a timely and accessible manner.

## Available Opportunities 2024 – 2029

The period 2024 – 2029 presents opportunities that ADPHA Uganda will harness to promote the organisation and the interests of the members.

### Supportive Policies

There are a number of policies in the Health Sector in general, and HIV & AIDS, TB and Malaria in particular. These policies will continue guiding and justifying the work of ADPHA Uganda. For instance, they aim to achieve equity and universal coverage of service provision – which includes persons with disabilities. In particular, Uganda AIDS Commission has classified persons with disabilities among the “Special Interest Groups”, with special focus and effort.

Secondly, other national legislation and policies promote equality, equity and prohibit discrimination. The policies that directly support the work of ADPHA Uganda will include the Uganda Constitution (1995, as Amended); the Persons with Disabilities Act (2020, as Amended).

### Stronger disability movement in Uganda

Over the years, the disability movement in Uganda has shown great improvement. Many uni-disability organisations and networks of organisations of persons with disabilities have been formed both at the national level and subregional levels. ADPHA Uganda shares similar philosophies with some of them in advocating for the human rights and equitable service delivery. This shall provide opportunity for building synergies and tapping into their membership for increased reach of persons with disabilities; and utilising their platforms and spaces for increased advocacy and impact.

### Committed Staff and Board Members

ADPHA Uganda still have the founder members actively participating in its programs. Some are on the Board of ADPHA Uganda, others in different capacities. In addition, there are staff in senior positions working at ADPHA Uganda since its inception. Both the active founder members and the long serving staff are a big resource; they still hold the vision for which ADPHA Uganda was formed, with valuable institutional knowledge that continue driving the organisation. Willingly and continuously train and mentor the young/new ones.

Secondly, having the founder members and senior members of staff still committed to the organisation for 15 years in an indication of stability at the organisation.

### Committed and Focused Partners

There are a number of partners committed to promoting human and people’s rights, including persons with disabilities. There are also partners whose philosophy is grounded in supporting the local organisations as a strategy for ensuring impactful and sustainable interventions. In addition, there are partners committed to ending the scourge of HIV & AIDS, TB; while others are focused addressing prevention of malaria, poverty, education, SRHR, gender imbalances, gender based violence, unemployment, climate change, civic participation, etc. All these provide an array of opportunities for funding but also for building synergies for tackling specific issues affecting persons with disabilities living with HIV & AIDS, and those affected by TB.

### Availability of Community Empowerment Programmes

There are a number of targeted empowerment programmes that many of persons with disabilities living with HIV & AIDS, and those affected by TB could also benefit. These include the Disability Grant, the Youth Livelihood Programme, The Women Entrepreneurship Programme, *Emyooga*, PDM, etc. This gives an opportunity to ADPHA Uganda to provide technical support and guidance to their members so as to meet the requirements of these programmes.

### Availability of Active Self-Advocates

The fight against HIV & AIDS and TB, and the associated stigma is best done through promoting behavioural change, and positivity for those affected. ADPHA Uganda is supporting and working with a number of persons with disabilities living positively with HIV & AIDS and those that have survived TB. These have been instrumental in promoting behavioural changes, but also sharing personal experiences that has informed fellow persons with disabilities, service providers, policy makers and others. These shall remain a resource for ADPHA Uganda in the period 2024 – 2029.

## The Potential Threats

### Funding

ADPHA Uganda relies greatly on resources provided by international organisations and other partners. The internal revenue, mainly from subscription fees by members and contribution of members and friends of ADPHA Uganda, contributes less than 0.1% of the annual budget. However, there has been a noticeable progressive reduction of opportunities for funding from the international organisations. The impact of COVID-19 and other disasters on aid is likely to continue during the period 2024 – 2029. During this period, ADPHA Uganda shall identify other potential opportunities, both locally and internationally.

### Policy Shifts

There has been changes in policies that are likely to impact the functioning of ADPHA Uganda and its members in 2024 – 2029. For instance, the rationalisation of the government agencies currently going on will likely result in new demands for registration and operation of the NGOs in Uganda.

Secondly, ADPHA Uganda is currently operating in 10 districts, with plans to perhaps increase the geographical coverage in future. Since each district is mandated to develop independent regulatory frameworks for operations of the NGOs and other civil society organisations, ADPHA Uganda will most likely have to put a great effort into compliance both at the national and district levels.

### Increasing Geographical Coverage

There are strong voices coming from persons with disabilities living with HIV & AIDS and TB in other regions of Uganda, urging ADPHA Uganda to extent their services to their regions. Similar agitations is being made by some of our donors. Expanding operations of ADPHA Uganda to other regions, such as the South Western, the Western, West Nile, the North and the Karamoja is the most desirable by the leadership and management of ADPHA Uganda, so as to have a significant proportion of the coverage of Uganda, but also open up to funding opportunities in those regions. However, there is cognisance that expanding operations with the current resources will stretch the team and also spread the interventions so thin to have any meaningful impact. During the 2024 – 2029 period, ADPHA Uganda will study this further and build the internal capacities to make the expansion a reality in future.

### Limited Capacity at ADPHA Uganda

The needs of people living with HIV & AIDS and those affected by TB are quite many; and those of persons with disabilities living with HIV/AIDS and those affected by TB are unique as well. These needs require multi-dimensional interventions, not only ensuring equitable access to services at the health facilities, but also to address the nutritional needs, economic needs, and other psychosocial support. Currently, ADPHA Uganda has few staff and limited resources to meet all the expectations of the members.

### High levels of poverty in the Community

The areas in which ADPHA Uganda is currently operating still experiences high levels of poverty in the community. The situation of persons with disabilities is even worse. Whereas ADPHA Uganda has endeavoured to sensitise and raise awareness on HIV and AIDS; and the available services, the persons with disabilities living with HIV & AIDS still find challenges seeking those services. Many fail to get money for transport to get the drugs and other services, others have failed to meet the costs for the domestic needs, such as costs for feeding properly. Often they expect ADPHA Uganda to support them financially.

The high levels of poverty, and particularly among persons with disabilities living with HIV & AIDS, and those affected by TB is likely to cause overdependence on ADPHA Uganda and, in a long run, affect the impact of the interventions.

ADPHA Uganda shall continue sensitising the members; and seeking and linking them to opportunities that shall empower them economically and socially.

### Cyber Security and Cyber Abuse

There is an increase in risks associated with digital advancement. These include risks of fraud and other fiduciary risks; compromising data protection; cyber abuse, harassment and bullying, all of which can dent the reputation of ADPHA Uganda and expose our members and staff to risk. ADPHA Uganda shall continue building capabilities in financial management, data protection and safeguarding to avert some of the risks.

### Climate Change

Globally, there is noticeable changes in the climate. There are changes in the seasons, characterised by prolonged drought spells, sometimes the rainy season starts during unexpected periods, with shortened wet periods. The climatic changes have also been characterised by heavy rains, causing flooding and sometimes landslides. These changes in the climate affects the livelihoods of persons with disabilities. In addition, they affect the operations of ADPHA Uganda – often times roads have become impassable and the commodity prices also go high. ADPHA Uganda will raise awareness how climate change is affecting persons with disabilities and advocate for remedial actions.

### Increasing Abuse of Sexual and Reproductive Health Rights

There is increasing and systemic discrimination of People with Disabilities living with HIV & AIDS, and affected by TB and other vulnerable people in the community, including LGBTQI+, children out of school, women and girls, and young people. Due to beliefs, stigma, ignorance, People with Disabilities living with HIV & AIDS, survivors of TB and other vulnerable groups continue to be excluded and denied information on SRHR and other related services on sexual and reproductive health. ADPHA Uganda will raise awareness on SRHR and advocate for equitable access of sexual and reproductive health services and care.

# The Plan 2024 – 2029

## Objectives

For the period 2024 – 2029, ADPHA Uganda shall be guided by the following objectives:-

### Building a strong and sustainable organisation

Since ADPHA Uganda has transitioned into a national NGO, effort shall be put to strengthen the capacity that suits that new stature. Additionally, the intent shall be to push in place systems and structures that shall enable ADPHA Uganda to withstand the shocks that is likely to encounter, and making it more accountable and compliant. This shall entail reviewing the structure and strengthen the governance at ADPHA Uganda. It shall also entail enhancing the capacity of the members.

### Deepening the mobilisation of members

The review of ADPHA Uganda’s work has revealed that its interventions have reached largely persons with physical disability. For the period ahead, ADPHA Uganda shall aim to reach other categories of disability. This shall entail working collaboratively with other OPDs.

### Amplify the work of ADPHA Uganda

The review of ADPHA Uganda’s work has further revealed that it has done great and unique things. In addition, ADPHA Uganda has generated a lot of knowledge and experience, but all remain unknown. ADPHA Uganda aim to document its work and share their experiences. This shall increase the visibility of ADPHA Uganda and inadvertently contribute to the resource mobilisation efforts. This shall entail conducting studies, documenting case studies and revamping the website.

### Developing and Implementing Complementary and Integrated Programmes

ADPHA Uganda aims develop and strengthen programmes and interventions that address the underlying causes and drivers of discrimination and exclusion of persons with disabilities living with HIV & AIDS, and those affected by TB and those affected by malaria from accessing adequate services and care. This shall entail implementing programmes that promote gender equity, including prevention of gender based violence.

ADPHA Uganda shall develop and implement programmes and projects aimed at promoting and enhancing the livelihoods of persons with disabilities living with HIV & AIDS, and those affected by TB in a sustainable manner. This shall include skilling the persons with disabilities and their support networks, and increasing the support to enabling persons with disabilities and their family/support networks to participate effectively in economic activities and programmes.

This shall also entail developing and implementing programmes that promote sexual and reproductive health rights among persons with disabilities and other marginalised groups.

In addition, ADPHA Uganda shall develop programs and projects aimed at building resilience of persons with disabilities living with HIV & AIDS, and those affected by TB against the effects of climate change.

### Diversify funding and other streams of resources

In view of the increasing unpredictable funding landscape and the increasing importance of ADPHA Uganda’s work in promoting the rights of persons with disabilities, especially those living with HIV & AIDS and those affected by TB, ADPHA Uganda shall aim to increase the efforts to mobilise resources. This shall include promoting innovations and creativity in resource mobilisation.

### New partnerships and alliances

The review of ADPHA Uganda’s previous approaches and work has revealed that it is imperative to work with others to advance the objectives of ADPHA Uganda. For the period ahead, in view of the lessons learned and the new trends in HIV & AIDS and TB, and ADPHA Uganda’s desire to be more relevant, effective and efficient, ADPHA Uganda shall seek new partnerships and alliances, both in the technical and strategic spheres to advance technical, financial and strategic goals.

## Key Milestones

* ADPHA Uganda has obtained sufficient resources to adequately run the operations of ADPHA Uganda to the satisfaction of its members.
* ADPHA Uganda has grown in scope – both geographical and programmatic coverage.
* An increment in the number of strategic partnerships and alliances; and funding partnerships
* Persons with disabilities in Uganda with increased knowledge and awareness on HIV & AIDS and TB.
* Persons with disabilities in Uganda living with HIV & AIDS and those affected by TB empowered and living decent lives.

## ADPHA Uganda Strategic Approach

In order to achieve the Objectives for the period 2024 – 2029 mentioned in Section 4.1 above, and mitigating the impacts of the threats identified in 3.4, ADPHA Uganda shall adopt the following approaches in 2024 – 2029.

### Rights Based Focus

ADPHA Uganda anchors its philosophy in advancing the enjoyment of human rights. The Vision and Mission of ADPHA Uganda are drawn on the basic principles of human rights in general, and rights of persons with disabilities in particular. The choice of program areas and interventions reflect the commitment of ADPHA Uganda to advancing the rights of persons with disabilities to health and socio-economic rights as enshrined in the Bill of Rights, the UNCRPD and other regional and national instruments.

ADPHA Uganda shall maintain the enjoyment of all forms of human rights at the centre of its work; and strengthen the focus of rights of persons with disabilities in 2024 – 2029.

### Multisectoral Approach

HIV & AIDS, TB and malaria compound the challenges persons with disabilities encounter by virtue of their disability. For instance, persons with disabilities face discrimination and stigma, living with HIV & AIDS or having been affected by TB makes the situation even worse.

The needs of persons with disabilities living with HIV & AIDS and those affected by TB and malaria are multi-dimensional in nature. The interventions therefore need to address all the aspects that prevent or limit the persons with disabilities living with HIV & AIDS, and those affected by TB from accessing adequate HIV & AIDS and TB services or from living a decent life.

ADPHA Uganda shall employ multisectoral approaches, aimed at:-

* Raising awareness among persons with disabilities and their social networks on HIV & AIDS and TB, and the attendant rights thereof;
* Empowering persons with disabilities living with HIV & AIDS, and survivors of TB and their social networks;
* Empowering service providers in the HIV & AIDS, TB, SRH and other community economic empowerment programmes; building strong community and family support networks of persons with disabilities living with HIV & AIDS and those affected by TB.
* Strengthening the community support systems, such as the peer monitors and self-advocates to promote behavioural change.

### Strengthen Governance and Leadership

ADPHA Uganda makes cognisance of the role of leadership and governance in promoting and achieving the goals and aspirations of an organisation. ADPHA Uganda will therefore commit to building and strengthening the governance and leadership as a strategy of achieving the objectives outlined in Section 4.1 above. This shall entail the following:-

* Ensuring that the relevant policies are in place. In addition, these shall be reviewed regularly and updated to reflect the prevailing situation.
* Ensuring the structures of ADPHA Uganda are duly constituted in accordance with the Constitution of ADPHA Uganda; and are adequately oriented on their roles and responsibilities.
* Skilling of the members, the leaders of the structures, the members of the Board and the staff in areas that promote team building, human rights approaches to programming, organisational culture and code of conduct, resource mobilisation and utilisation, building and running a successful organisation, nurturing partnerships, and any other skill as per the prevailing situation.
* Promoting effective participation and involvement of members and stakeholders when making key decisions of the organisation and other programs.

### Increase Coverage, Reach and Scale-up

Based on the lessons learned over the years, ADPHA Uganda has gained substantial experience in promoting the rights and welfare of persons with disabilities living with HIV & AIDS, and those affected by TB. Leveraging on this experience, ADPHA Uganda shall increase the thematic areas of intervention in HIV & AIDS and TB. In addition to promoting access to information and other facility based services on HIV & AIDS, and TB, ADPHA Uganda shall endeavour to mitigate the socio-cultural and economic impacts of HIV & AIDS and TB on persons with disabilities.

In addition, ADPHA Uganda will aim to reach and include all other persons with different types of disability living with HIV & AIDS, and those affected by TB, as well as reaching more persons with physical disability living with HIV & AIDS, and those affected by TB in the current 11 districts of operation. In the long term, ADPHA Uganda will build up capacity to cover other areas in Uganda.

### Documentation and Improving Knowledge Management

In order to promote learning, and ability to adapt to changes, ADPHA Uganda shall actively engage in documenting the outcomes and sharing the lessons being learned by ADPHA Uganda. This shall entail commissioning specific studies on lived experiences of persons with disabilities living with HIV & AIDS and studies on the intersectionalities of living with HIV & AIDS or affected by TB as a person with disabilities with gender, poverty and culture.

In addition, ADPHA Uganda shall document the impact and the drivers of gender based violence, and on sexual, reproductive and health rights of persons with disabilities living with HIV & AIDS and those affected by TB. Other areas of interest include lessons on how changes in the climate is impacting persons with disabilities living with HIV & AIDS.

ADPHA Uganda shall aim to generate and proactively share knowledge on the contemporary issues of persons with disabilities and SRHR, and other pandemics – through documenting and publishing the experiences and lessons learned, and participation in fora and platforms that can aid in disseminating information, and influencing discussions.

ADPHA Uganda shall also revamp and update its website to make more informative and interactive. This shall also include reviewing and updating ADPHA Uganda’s Communication and Branding Strategy.

### Strengthening and Increasing Strategic Partnerships and Alliances

To achieve the vision and mission of ADPHA Uganda, and the aspirations for the period 2024 – 2029, ADPHA Uganda shall put great effort in nurturing the current partnerships, and seek to establish new partnerships.

ADPHA Uganda shall endeavour to deepen partnerships with communities where they work in order to make their work more relevant, impactful and sustainable. ADPHA Uganda shall ensure that the memoranda of understanding with the district local governments are operationalized, and any MoUs that are pending, or those that require review and renew are duly processed and approved.

Currently, ADPHA Uganda has a cordial working relationship with Masaka Catholic Diocese; in the period ahead, ADPHA Uganda shall seek to partner with Catholic Parishes that are closer to the rural communities, and those that fall outside the jurisdiction of Masaka Diocese, like Mpigi and Gomba.

In addition, ADPHA Uganda shall seek partnerships with other religious denominations in the areas of operation.

ADPHA Uganda shall continue nurturing the relationship with The Pokino, as well as seek opportunities to strengthen the partnership with other cultural leaders in the Buganda Kingdom.

In pursuit of the desire to increase knowledge on HIV & AIDS, and TB and SRHR; and to be able to contribute to the knowledge on HIV & AIDS, and TB and SRHR, ADPHA Uganda shall seek to partner with individuals, activists, academicians, practitioners, authors and organisations that are grounded in the area of HIV & AIDS and TB. Among the organisations that ADPHA Uganda shall seek to partner with shall include The Medical Research Council, Uganda AIDS Commission, Infectious Diseases Institute (IDI), NTLP, Ministry of Health and The Rakai Health Science Programme. In addition, ADPHA Uganda shall seek and subscribe to appropriate networks of persons with disabilities (both national and international networks); and networks of technical practitioners in the HIV & AIDS and TB in order to increase the visibility of ADPHA Uganda; and to influence the discourse on HIV & AIDS and TB by bringing the HIV & AIDS and TB among persons with disabilities to the fore.

In addition to enhancing efforts to seek funding from the traditional donors to fund the planned activities and programs of ADPHA Uganda in 2024 - 2029, ADPHA Uganda shall devise innovative ideas to mobilise resources. Some of these innovations shall include raising funds from social entrepreneurship and seeking funding opportunities from the private sector in form of Corporate Social Investments. Other initiatives shall include encouraging members to pay the annual subscription and membership fees, and other local contributions from well-wishers.

### Improving the Quality of Delivery of the Planned Activities

In order to strength the trust and confidence of the members, the stakeholders and the donors, ADPHA Uganda will strive to ensure high quality of implementation of the planned activities. This is characterised by the kind of context analyses, the quality of proposals and budgets prepared, the reports and the levels of compliance. ADPHA Uganda shall continue conducting periodic skills assessments of the staff matched with the tasks at hand in order to develop appropriate capacity enhancement and investment plans.

### Strengthening the Secretariat of ADPHA Uganda

ADPHA Uganda aims to reduce on the operational costs and increasing visibility and its profile. Therefore ADPHA Uganda shall construct an office in Masaka to act as the Headquarters of ADPHA Uganda.

Secondly, ADPHA Uganda will invest in improving operational efficiencies. This shall entail leveraging on advancements in technology to digitize operations and systems; and enhancing the skills of staff, volunteers and member on ICT.

## Program Interventions & Activities

The specific activities and intervention for the period 2024 – 2029 shall be drawn from the following broad areas:-

### Mobilisation of Persons with Disability

Persons with disability in the areas that ADPHA Uganda is operational shall be mobilised and sensitised – to raise awareness on HIV & AIDS and TB. The sensitisation shall focus on demonstrating how HIV & AIDS and TB affects persons with disabilities and how they can be prevented and how their impacts can be mitigated. This sensitisation will likely result in behavioural changes among persons with disability, reduction in self-stigmatisation of those infected with HIV and TB. There is also likelihood of an increment in the number of persons with disability who test positive for HIV and TB seeking treatment and care, and living positively with HIV & AIDS.

The mobilisation of persons with disability shall also entail adapting the messages developed by the Ministry of Health, Uganda AIDS Commission, UNAIDS to languages, illustrations and formats that can be understood by the different categories of persons with disability.

This shall also target OPDs and other actors in the disability sector to influence for the inclusion of persons with disability living with HIV & AIDS and those affected by TB in their programs and interventions.

### Empower Service Providers, Policy Makers and Donors on Disability

Effort shall be made to increase the awareness of service providers, activists, academicians, policy makers, donors, and other actors on disability and the intersectionality between HIV & AIDS and TB and disability. This will likely result into policies, programmes and services that are inclusive of persons with disability living with HIV & AIDS and those affected by TB. Activities under this theme are also aimed at increasing the available funding and support to persons with disability living with HIV & AIDS and those affected by TB.

### Empowering persons with disability

In addition to raising awareness on HIV & AIDS and TB describe in Section 4.4.1 above, ADPHA Uganda shall aim to empower persons with disability living with HIV & AIDS and those affected by TB as a strategy for mitigating the impact of HIV & AIDS and TB. The empowerment shall be in form of imparting skills for income generation, life skills to promote safety and personal care. The empowerment shall also entail providing information on the available community empowerment programmes such as *Emyooga*, *Parish Development Model, Youth Livelihood Programme*, etc.; and brokering linkages to these opportunities.

ADPHA Uganda shall increase the conscientiousness of persons with disabilities on their rights as enshrined in the UNCRPD, the Constitution of Uganda, the Persons with Disabilities Act, and other national and local level policies.

### Capacity Building of the Board, Staff, and Members

ADPHA Uganda shall continue prioritising skilling of staff, the Board and the members in areas that promote good governance, resource and social mobilisation. This shall also entail reflections and retreats in order to encourage sharing of experiences, information and learning.

### Integrated and Holistic Interventions

ADPHA Uganda shall maintain a holistic view of the factors affecting persons with disabilities, including those living with HIV & AIDS, and those affected by TB; and other vulnerable populations. In addition to focusing on promoting equitable accessibility of services and care for persons with disabilities living with HIV & AIDS, and those affected by TB, ADPHA Uganda shall design and implement interventions with focus on the cross cutting issues, including sexual, reproductive and health rights, climate change, sustainable livelihoods, including food and nutritional security. This shall also include developing targeted and specialised programmes for the youth and women with disabilities and other vulnerable groups.

### Policy Advocacy and Stronger Voice for Inclusion

ADPHA Uganda, cognisant of the achievements made over the years, and desirous to getting to scale and more sustainably, and aware that the fight against HIV & AIDS and TB, and more so among persons with disabilities requires input from many players, ADPHA Uganda shall seek to strengthen the engagement of the stakeholders and to influence policies in order to achieve meaningful inclusion of persons with disabilities living with disabilities, and those affected by TB.

# Executive Signatures

We, the undersigned, confirm that we have read and reviewed the **ADPHA Uganda Strategic Plan (2024–2029)**. We commit to supporting its implementation and ensuring alignment with the organization's mission and vision.

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| --- | --- | --- |
| **Name** | **Position** | **Signature** |
| BUGEMBE DICK | CHAIRPERSON | ………………….. |
| NAKAYIBA WINNIE | VICE CHAIRPERSON | ………………….. |
| WANYANA CATE | TREASURER | ………………….. |
| NABBANJA REHEMA | SECRETARY | ………………….. |
| NAKANWAGI OLIVIA | MEMBER | ………………….. |
| MUWANGA EDAWRD | MEMBER | ………………….. |
| MPAGI JAMES | MEMBER | ………………….. |

